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Child Maltreatment as a Social Problem:
The Neglect of Neglect

by

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THEORY & REVIEW

CHILD MALTREATMENT AS A SOCIAL PROBLEM:
The Neglect of Neglect

Isabel Wolock, Ph.D., and Bernard Horowitz, Ph.D.

Child maltreatment is analyzed utilizing a "social problem" framework. Although data reveal that child neglect is more prevalent and its consequences as serious as child abuse, it has received far less attention than has abuse. Historical factors and the relationship between child neglect and poverty are viewed as the major reasons for the deemphasis of neglect relative to abuse.

Public attention to a social problem does not depend solely, or even mainly, upon the objective characteristics of the phenomena or conditions that ultimately come to be recognized as a social problem. Whether or not a condition receives attention as a social problem -- and the way in which it is defined -- tends to be only weakly related to the significance of the problem to society as a whole, to how people are affected by the condition, to the number of people affected, to the severity of the effect and to the causes of the condition. Many conditions that are identified as social problems exist long before they are recognized publicly as such. Many social problems go through an "issue-attention cycle" that typically starts with a problem suddenly gaining widespread public attention, remaining at a high level of visibility for a short time and then, although there may be little or no resolution, gradually receding from the public limelight.¹⁰ Blumer⁶ has characterized social problems as

... products of a process of collective definition instead of existing independently as a set of objective social arrangements with an intrinsic make up. (p. 298)

He noted that some fundamental malfunctioning of society does not inevitably give rise to a social problem. A social problem emerges only as

... the result of a process of definition in which a given condition is picked out and identified as a social problem. It does not exist for a society unless it is recognized by that society to exist. In not being aware of a social problem a society does not perceive it, address it, discuss it, or do anything about it. (pp. 301-302)

Blumer cited five stages in the development of a social problem: the emergence of the problem, its legitimization or gaining of social endorsement and respectability, mobilization of action, formation of an official plan of

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action and implementation of the official plan. Political processes, values and activities of special interest groups, mass media and societal values and norms are some of the factors that affect the outcome at each stage of the process.

Parton³¹ suggested that, in studying a social problem, it is crucial to identify the definers of the problem. Who they are and how much influence they wield will determine how the problem is perceived and whether others are convinced that a particular condition is dangerous. Looking at how and by whom a social problem is defined is more than an academic exercise; the kind of definition a problem is given -- and by whom -- will in large measure determine the resulting actions taken to solve it.

Child maltreatment, which has received a great deal of public attention in the last two decades, is an apt illustration of the way in which a social problem emerges and of how and by whom it is defined. Although there tends to be agreement at a very general level that child maltreatment takes two predominant forms -- child abuse and child neglect -- there is considerable ambiguity, vagueness and lack of consensus as to precisely how these two phenomena are differentiated and which specific forms of parental behavior are subsumed under each. This confusion pervades almost all contexts in which the problem is addressed, whether it be political debate, legislation, agency intervention, research, or community perceptions. Given the lack of agreement on the meanings of child abuse and neglect, it is important to specify what we mean by these terms. Child abuse refers to those intentional acts of a parent or caretaker which result, or are likely to result, in physical injury to a child. Child neglect is the failure of the child's parent or caretaker, who has the material resources to do so, to provide minimally adequate care in the areas of health, nutrition, shelter, education, supervision, affection or attention and protection.

THE DOMINANT DEFINITION

Child maltreatment as child abuse. Child maltreatment as a social problem has come to be defined predominantly as child abuse, with child neglect having received relatively little attention and having been dealt with generally as an appendage to the problem of abuse. This is manifested in a number of arenas. First, the focus of the media has been predominantly on abuse. Signorielli⁴² carried out an extensive content analysis of the popular literature's coverage of child maltreatment from 1972 to 1978. Among 242 titles of magazine stories, physical abuse was found to be the most prevalent topic, appearing in 21% of the titles; in comparison, child neglect appeared in 9%. The author also noted that the data from a detailed content analysis of 50 articles

... reveals that child abuse means physical abuse, at least for the authors and readers of the articles in this sample. Physical abuse, especially the beating of a child, was the type of child abuse covered most often, with 86 percent of the stories mentioning some type of physical abuse and more than three quarters reporting the beating of an individual child. (p. 290)

While child neglect was also a topic, it was treated solely in general terms; only a small proportion of the articles discussed specific types of neglect.

Political debate is another arena in which it is apparent that child maltreatment is defined primarily as physical abuse. Patti³² noted that in congressional hearings prior to the passage of the Child Abuse Prevention and Treatment Act of 1974

... it was clear throughout the deliberations in the Senate Subcommittee that Senator Mondale wished to restrict the definition of the problem to instances of severe physical abuse and its correlates. There are only one or two instances throughout all of the Senate Subcommittee hearings where testimony focused on parental neglect per se ... There were no more than two or three pages of testimony in the Senate hearings that addressed child neglect as opposed to abuse. (pp. 2-3)

Similarly, the emphasis of the hearings and debate prior to the extension of the Child Abuse Prevention and Treatment Act in 1977 was upon child abuse rather than neglect.^{45,46}

The overshadowing of child neglect by child abuse is also apparent in the research and practice literature. Polansky,³⁷ one of the few researchers who has focused almost exclusively on child neglect, has pointed out that the Library of Congress has a category for child abuse but not for child neglect. The body of information on child neglect remains "diffuse and rudimentary." Surveys of the literature reveal this bias; the NCCAN 1977 Analysis of Child Abuse and Neglect Research²⁵ concentrates upon abuse almost to the exclusion of neglect. In the Office of Human Development's 1978 Annual Review of Child Abuse and Neglect Research,²⁹ which lists research studies completed or under way, the great preponderance of research concerns abuse. Similarly, papers presented at the national conferences sponsored by the National Center on Child Abuse and Neglect (NCCAN) have focused upon abuse rather than neglect. An analysis of the titles of papers presented at the Fourth National Conference on Child Abuse and Neglect in 1979³⁸ showed that 43% contained "abuse" alone, 27% "abuse and neglect" and 3% "neglect" alone. In a similar vein, Shapiro⁴⁰ noted:

This phenomenon was also evident at the 1978 Annual Conference on Child Abuse and Neglect when discussion during a workshop specifically directed to the problem of neglect shifted to abuse-related questions and remained focused on abuse, while none of the participants appeared aware of the shift or drew audience attention to it. (p. 120)

A computer search in September 1983, using the Social Science Citation Index Data Base, revealed 662 citations with "child abuse" in the title compared with only 23 titles containing "child neglect".

Child maltreatment cuts across all social classes. The prevailing belief concerning child maltreatment is that it cuts across all social classes to an equivalent degree, i.e., it is as much a middle-class as a lower-class phenomenon. A number of influential scholars and researchers have explicitly

emphasized that child maltreatment is not a problem related to social class,^{5,11,12,27,43} while other scholars have simply not dealt with the issue of the relationship between child maltreatment and socioeconomic status.⁵² To the extent that some studies show that child maltreatment occurs to a greater degree among the poor, this finding tends to be discounted as a function of labeling and reporting patterns which are biased against the poor. As treated in the popular press and on television, child maltreatment is physical abuse and is more often portrayed as happening in middle-class than in lower-class families.

The effort to deny that the prevalence of child maltreatment is a class-related problem was particularly apparent in the Senate hearings that took place prior to the passage of the Child Abuse Prevention and Treatment Act of 1974. Patti³² observed that Senator Mondale went to great lengths to depict abuse and neglect as serious problems of the affluent, not just of the poor; to the extent that evidence to the contrary was presented, Mondale responded that the middle class was better able to keep it hidden. In his discussion of the hearings, Berelman⁴ observed that the testimony of Gil, who presented evidence that abuse occurred disproportionately in the lower class, was discredited. When a team of New York witnesses presented similar statistics for their state, the response was that New York was an exception.

Child maltreatment as a psychological problem. The dominant view, emerging from the practice, research and popular literature, is that child maltreatment is a disease and that the cause of the disease is a personality disturbance of the abusing parent. Literally hundreds of studies -- probably the bulk of investigations into the etiology of child maltreatment -- have been concerned almost exclusively with psychological variables, i.e., with discovering distinctive personality characteristics or problems of abusing parents, or deficits in the nurturing or "mothering" provided to these parents when they were children. It is of interest that a paper by Stewart⁴⁴ discussed the frustrations and difficulties of attempting to do research on child abuse from a perspective other than a psychiatric one. She concluded that

... this perspective had established an entire set of institutional arrangements for defining and treating the problem which virtually eliminated the introduction of any alternative explanations. (p. 1)

Despite the fact that the results of studies of psychological factors have been largely inconclusive and inconsistent,^{25,30} the belief that there is a defect in the abusing parent's personality has been tenaciously clung to by the professional and layperson alike. Conrad and Schneider,⁹ in their discussion of the medicalization of child abuse, contended that

... sociological approaches, although they may be more comprehensive and focus more on "root" causes of abuse, are largely disregarded by those who have to deal with more practical tasks at hand: reporting abuse, protecting children and treating abusers. (p. 168)

This approach is also predominant in the social work practice literature, which contains article after article recommending some type of psychosocial intervention in child maltreatment situations. A national study

of social services to children and their families showed that mental health services ranked first among services recommended for children and families reported for abuse.⁴¹ Similarly, Shapiro⁴⁰ reported, in her study of abusing and neglected families, that mental hygiene clinics were among the services most likely to be both considered and used.

THE EMPIRICAL FACTS VS. THE DOMINANT DEFINITION

A major contradiction exists between what is known about child maltreatment and how it is defined as a social problem. Although child abuse has been the focus of professional and public attention, child neglect is the more prevalent problem. As given in the NCCAN 1977 Analysis, estimates of the ratio of reported neglect to abuse cases ranged from a low of about 3:1²⁴,³⁷ to highs of 9:1 and 10:1.⁶,³⁵,⁴⁷ The Analysis itself accepted a ratio of 5:1 as "likely." The 1981 Annual Report of the American Humane Association (AHA)² cited a rate for neglect that was 1.7 times that of abuse (46% vs. 27%). This is fairly consistent with ratios of 2:1 the AHA had reported in previous years. According to the 1981 report, 59% of children experienced deprivation of necessities, compared to 25% who suffered some type of physical injury. A national study of the incidence and severity of child abuse and neglect²⁵ also showed a higher incidence rate for neglect than for abuse (4.6 for physical and educational neglect vs. 3.4 for physical assault). The higher rate of neglect than physical assault is particularly noteworthy considering that one of the criteria for inclusion in the study was evidence of serious injury or impairment as a result of the maltreatment. This is more apt to be lacking for neglect than for physical abuse. Finally, our New Jersey study of AFDC recipients reported proportions of 7% abuse, 62% neglect and 31% neglect and abuse combined.⁵¹ Other ratios and proportions could be cited; however, the important point is that neglect is much more prevalent than abuse.

Nor is neglect necessarily less severe than abuse. The most recent AMA report² showed that, of the total number of children who were reported to have died as a result of maltreatment in 1981, more than half (56%) died because of neglect and specifically because of the deprivation of necessities. The comparable figure for fatalities caused by a major physical injury is 34% (p. 12). The report of the Mayor's Task Force on Child Abuse and Neglect in New York City²² noted that neglect accounted for approximately the same proportion of deaths as abuse (p. 10). Data on severity reported by the NCCAN revealed that

... cases accepted ... in the area of physical neglect had serious injuries and worse, proportionately more often than did physical abuse cases (46% vs. 9 percent).²⁶ (p. 24)

Another area in which the data on child maltreatment clearly conflicts with how it is defined as a societal problem concerns the distribution of child maltreatment across socioeconomic groupings. Although child maltreatment certainly occurs among all socioeconomic classes there is substantial evidence that the poor are overrepresented in the statistics. Recent work confirms previous studies from the 1960s and early 1970s that show this relationship.^{15, 21, 29, 37}

The AHA² reported that 43% of the abusing or neglecting families in their survey were receiving AFDC or other public assistance. Pelton³³ found that at least 81% of his abuse and neglect samples had received public welfare benefits at some time and that 58% were at least partially supported by welfare at the time of his study (p. 94). Shapiro⁴⁰ found that 53% of her study sample were totally dependent upon public assistance and that 27% depended upon both earnings and public funds; in all, 80% were receiving public assistance in full or in part. Wolock and Horowitz⁵¹ described maltreating families on AFDC as "the poorest of the poor", with a material level of living even below that of nonmaltreating AFDC families. According to the National Study of the Incidence and Severity of Child Abuse and Neglect:²⁶

In comparison to the income distribution for all U.S. children, children from low income families are overrepresented in all maltreatment categories (p. 29)

The report goes on to point out that the relationship is stronger for neglect than abuse; 53% of neglected children in the study and 34% of abused children came from families with incomes of less than \$7,000. The types of maltreatment more commonly found among families with higher incomes (\$15,000 or more) were emotional neglect and emotional abuse.

FACTORS CONTRIBUTING TO THE DISCREPANCY

Given the substantial evidence that neglect is more prevalent than abuse, that it is just as serious and that both neglect and abuse are associated with poverty, how do we explain the widespread preoccupation with physical abuse, the emphasis on psychological causes and the insistence that child maltreatment is unrelated to social class? The historical events leading to the recognition of child maltreatment offer one explanation. A major factor in the emergence, legitimization⁶ and definition of child maltreatment as a social problem was what has been described as the discovery of the "battered child syndrome" by a group of pediatric radiologists in the early 1960s and the subsequent reporting of the new "illness" in a prestigious medical journal.^{9, 34} As Pfohl³⁴ noted, the report was a collaborative effort of a group of radiologists, pediatricians and psychiatrists. Kempe,²⁰ the senior author of the report, referred to abuse as a "clinical condition" and noted the "psychopathic" behavior of the perpetrators which he saw as a consequence of psychiatric factors indicative of "some defect in character structure" (p. 24). Endorsement of the report by the editorial board of the American Medical Association appeared in the same issue in which the report was published.

It is not surprising, given the prestige and influence of the definers and its reception and recognition within the wider medical community that concern and interest in the new medical "syndrome" caught on in both professional and lay circles. As Pfohl³⁴ observed:

The proliferation of the idea of abuse by the media cannot be underestimated. Though its stories were sensational, its credibility went unchallenged. What was publicized was not some amorphous set of muggings but a "syndrome." (p. 320).

In short, applying Blumer's framework,⁶ neglect was virtually excluded from the initial phase in which child maltreatment as a contemporary social problem was recognized, from the second phase in which the problem was legitimized and from the third in which support for the problem was mobilized. At the two later stages, in which action programs were formulated and implemented, the definition of child maltreatment was somewhat broadened to include neglect, though it appeared to be added on as an afterthought. By the 1970s most laws pertaining to the reporting of child maltreatment included neglect as well as abuse. And in 1974, when Congress passed The Child Abuse Prevention and Treatment Act, which resulted in the National Center on Child Abuse and Neglect, the act included neglect as part of the definition of child abuse.⁹

Once public attention was focused on abuse and the problem was defined as a medical problem and viewed as rooted in some psychological disturbance of the parent, the treatment of the problem "belonged" to the medical and the mental health professions. It is suggested that, at least in part, the strength and persistence of this particular definition of child abuse is a function of the keen professional stake and investment of some segments of the medical community and mental health professions in maintaining such a view.

From a different perspective, the low priority accorded to neglect may be understood in terms of the link between neglect and poverty, reflecting in essence the low priority accorded to the alleviation of poverty. Morris²³ examined Gallup Poll data on the public's perception of poverty and unemployment as major social problems during the last 40 years and showed that unemployment is far more likely than poverty to be viewed as a serious problem. The proportion of the public viewing poverty as a problem of overriding importance did not exceed 6% at any point during the 40-year study period.

Certain scholars, such as Keniston²¹ and Gil,¹⁵ identified problems underlying neglect as located within the basic social structure of our society. Kadushin¹⁸ pointed out that, while social action to reform the socioeconomic system producing child maltreatment was a prevalent ideology in the 1960s, by the '70s this approach had given way to viewing the child welfare system, rather than underlying social evils, as the appropriate target for change. In analyzing the hearings on the Child Abuse Prevention and Treatment Act of 1974, Patti³² speculated that the enormous magnitude of the problem of neglected children was evaded because of its close ties to poverty, which raised the potential cost of possible public alternatives beyond what congressional leaders considered politically feasible. Instead, a token program attempting to offer protection to small numbers of abused children when served in special programs was substituted.

Another explanation for the preoccupation with abuse and the inattention to neglect relates to both the visibility and newsworthiness of the former relative to the latter. Polansky et al³⁶ wrote:

Abuse is the more dramatic phenomenon; it can be specified and identified. While neglect may also prove lethal, it is typically insidious, chronic and terribly private. (p. 1)

Finally, child abuse is a form of overt violence and public interest and concern with violence has become a major preoccupation.

CONSEQUENCES OF INATTENTION TO NEGLECT

At the broadest level the inattention to neglect and to the strong relationship between neglect and poverty is an indication of the failure to confront the crucial deficit in social and environmental supports required to provide adequate child care. A more adequate child care policy is the only one likely to curtail significantly the incidence and prevalence of both neglect and abuse. It would include the provision of adequate income, health care, decent housing, safe neighborhoods, employment programs and other resources that are requisite for a positive family environment.

At the level of the agencies and professionals who provide the services to families in which maltreatment occurs, the inattention to neglect and its economic correlates, along with an emphasis on the psychological aspects of the problem, has resulted in a skewed allocation of the tiny amount of available resources -- with the greater share going to case management, psychological evaluation and treatment and, to a lesser extent, to the provision of concrete services such as homemaking and day care, the provision of emergency funds and advocacy for the client. A large portion of the scant resources is spent to maintain a public social service structure that is supposed to provide protection to maltreated children. However, with most of its funds spent on identifying and monitoring occurrences of child maltreatment, deciding whether children should be placed and maintaining placements, little remains with which to help families.

Further, in spite of data showing that neglect is no less severe than physical abuse, there is some evidence that preoccupation with abuse may have led the protective service worker to view neglect as being of lesser severity and, in the face of unmanageably high caseloads, to be more likely to screen out neglect cases.³⁹ This interpretation is based on the 1980 Annual Report of the AHA,¹ which showed that, although neglect continued to be the major type of report, the proportion of neglect reports declined from 58% in 1976 to 48% in 1980. The AHA report¹ noted that this may be due to a "heightened receptivity" to abuse and lessened receptivity to neglect:

This could be related to the fact that while there has been a considerable increase recently in the level of public awareness with regard to the problem, public awareness efforts focus almost exclusively on "child abuse", not neglect. Furthermore, resources allocated to support the CPS system have not kept pace with the tremendous increase in reporting. Faced with a choice, as it were, the reporting public as well as CPS agencies may be beginning to narrow their efforts to responding to those children perceived to be most at risk. (p. 33)

Data from a study of 184 intake workers in the New Jersey public child welfare agency confirmed these interpretations.⁵⁰ Presented with a set of 23 vignettes depicting child abuse and neglect situations of varying severity, workers tended to rate the neglect situations as somewhat less severe than the abuse situations. Given the steady decline in the resources of public child

welfare agencies, it is likely that the rate of rejection of neglect cases will accelerate.

Finally, the preoccupation with abuse, as noted previously, results in the dearth of systematic studies with a major focus upon neglect, thus severely limiting our understanding of how neglect is defined, which types of child neglect are associated with which types of family problems and what patterns of interventions are used with what results.

BROADENING THE DEFINITION OF CHILD MALTREATMENT

If it could be accomplished, there seems little doubt that shifting the primary focus of professional and public attention from child abuse to child neglect would have a number of desirable consequences. It would draw greater attention to the social and economic conditions associated with abuse and neglect, such as poverty, unemployment, inadequate housing and poor health and it might result in an expansion of the programs and services which aid neglecting and abusing families in meeting such survival needs.

We suggest, however, as others have, that there is a great danger in the way we currently divide problems pertaining to children and families into discrete and narrow segments such as child abuse, child neglect, delinquency, runaways, etc. and act as though we can treat each as a distinct and unique disease entity.^{7,14,16,19} This sharply contradicts what research has shown about these problems and their interrelationships. Abuse and neglect have generally been treated as separate problems and thus their interrelationship in the same family has not been clarified. In roughly one third of families recently studied,¹⁸ both neglect and abuse occurred in the same household, often to the same children. Child neglect is associated with a range of poverty-related problems such as crowded living conditions, substandard housing, alcoholism, unemployment and poor physical and mental health.^{17,37,51} Geismar¹³ identified an interrelationship among child abuse and neglect, "family disorganization" and socioeconomic status. (p. 232)

Thus, simply giving more emphasis to child neglect would not be enough. What is required is a major redefinition of the problem as our failure to meet the physical, social and emotional needs of a large proportion of our children. This would combine many of the problems now viewed as separate and would refocus remediation efforts upon the total supports and resources that children need in order to grow up healthy and productive. As advocated by a number of professionals, the family unit would be the primary target of services and programs.^{3,16,19,28}

If we continue to approach child abuse and child neglect, as well as the other problems associated with them, as discrete problems, child abuse and child neglect are likely to fall victim to the fourth and fifth stages of the "issue-attention cycle."¹⁰ In the fourth stage there is likely to be a gradual decline of interest as people realize how difficult and costly the solutions are; they lose interest, feel threatened, or become bored. In the fifth and final stage the issue "moves into a prolonged limbo -- a twilight realm of lesser attention or spasmodic recurrences of interest" (p. 40).

Problems such as abuse and neglect possess the characteristics which Down¹⁰ observed are associated with the kinds of problems that move through the cycle. One characteristic is that the individuals suffering from the problem are a powerless minority. Another is that their suffering seems closely intertwined with elements of the basic social structure that are beneficial to the majority or to an influential minority in the society. Currently, the majority and the powerful minority seem to believe it is in their interest to refuse to do anything fundamental about poverty. Finally, the problem is one in which the media may eventually lose interest as a topic for reform. To the extent that child neglect continues to be much more prevalent among poor, powerless families and no elements in society's power structure organize to alleviate the problem,

... the odds are great that [the problem] will soon move through the entire issue-attention cycle -- and therefore will gradually fade from the center of the stage⁹ (p. 42) ...

... or be transformed into an issue more amenable to use by those in power for their own political advantage. Recently, an article in the New York Times⁴⁸ announced the formation of a Task Force on Family Violence to study such problems as spouse and child abuse and mistreatment of the aged. The nine-member Task Force will be headed by Detroit's chief of police and will include a state attorney general, a district attorney and another chief of police of a major city. One cannot help but be concerned about the effect that this Task Force may have on the future definition of child maltreatment: To the extent that these persons, heavily representing the court system, become the definers of child maltreatment, we may move even further backward and end with a definition of child maltreatment as primarily a legal problem resolvable by stricter law enforcement and punishment of parental offenders who abuse their children with criminal intent.

CONCLUSION

This analysis suggests that the upsurge in concern about the issue of child maltreatment over the last 15 years has resulted in few benefits for the vast majority of neglected children; their basic requirements remain unmet. It now seems clear that, for the most part, those who sought to alleviate child abuse -- including medical and mental health practitioners, writers and researchers, media people and political leaders who pressed for legislation and created a federal apparatus for dealing with the problem -- had little idea of the dimensions and characteristics of child neglect nor any intention of presenting a program for its alleviation. Instead, what we have are incredibly swollen caseloads of protective service situations, mostly child neglect, or combination of child abuse and neglect, reported to public child welfare agencies. These agencies lack the authority, resources, staff and perspective to do more than function, more or less unwillingly, as part of the cover-up for the political failure to provide relevant help to these children. For example, we have long known that offering quality systematic child health care through a program such as CHAP (Child Health Assessment Program) could make a crucial difference in reducing the suffering of hundreds of thousands of lower-income children. We also know that the cost of a universal health program of this nature would be very, very low when we take into account the

lessened disability rate throughout their lives that would result from early and periodic screening, diagnosis and treatment of childhood illnesses. Many studies of neglected children have shown high rates of illness, disability, handicap and accidents that, in part, are not adequately remedied because of the nature of the medical care provided. All too often these children receive haphazard, crisis-oriented care at overcrowded public hospitals by physicians who are overburdened, rushed, unfamiliar with the children's medical and other background information and unlikely to be in a continuing relationship with the families.⁴⁹ Some European countries are puzzled by the U.S. preoccupation with assessing the numbers of maltreated children, since their universal medical care programs make it much more likely that they will get the chance to help children who are not doing well in the course of regular health care visits.

Our continued obsession with attempting to unravel the frequently obscure and diverse motivations of that small minority of parents who deliberately set out to inflict severe physical harm on their children serves to shift the definition of the social problem away from those interventions that we know are effective and helpful, toward those that are questionable, given the present state of our knowledge, social structure, organizational abilities and willingness to provide the funds. We know this society could provide all our children with quality health care, housing, schools, food, clothing, safety and all other material preconditions for living a decent life. While we are far from being able to understand all the reasons that lead parents to act toward their children in different ways, we do know that an essential precondition in a great many cases of substandard child care is society's failure to provide specific, concrete forms of care and support to supplement the family's own child care. We could easily afford to provide these supplemental aids to families; the provision of these deficit supplements, in and of itself, would reduce the probability that child maltreatment would be as severe a danger to the child's well being, even in those cases where it does not change parental behavior as much as we would hope.

It takes no great insight to understand why we carefully avoid accepting the abundant evidence that indicates that readily applicable interventions in the family's material circumstances would help neglected children most: we have divided America's children into "theirs" and "ours". We don't want to spend "our" money on "their" children -- though we never openly admit it. Rather, we claim that the issue is motivational; the benefits would not reach the children because of some deficit in the family, some dysfunction not amenable to appreciable amelioration with any material form of entitlement benefits. Or we turn the argument toward those who see the likelihood of increased child neglect in conditions of poverty and material deprivation and accuse them of saying the poor love their children less than other people do. What we fail to recognize all too often is that material deprivation frequently transforms other family difficulties such as alcoholism or mental illness into a clear and present danger to the well-being of children. Among more affluent families in which the primary caretaker has difficulties carrying out basic responsibilities, it is not at all uncommon for the family to purchase various forms of assistance, including supplemental child care in the home, to safeguard the children and keep the family intact.

Neglect is a label that is applied to one category of children from a much larger group, most of whom are living in poverty. Societal patterns of resource allocation have deprived these children of their right to the opportunity to live productive and healthy lives. To some it may seem exceptionally unrealistic to talk about the rights of children to adequate material and social resources at a time when children's supportive services and programs are reeling as a result of a heavy fiscal and ideological onslaught that has not yet come to an end. To such individuals, a more practical approach might be to advocate a policy that would attempt to salvage as much as possible.⁸ This nation was, after all, making some small but measurable progress in child nutrition, health and education in the 1970s. However, it is our belief that we must attend now to the full dimensions of the agenda of societal changes required to give children their rights. If we fail to act now we will be ill prepared for the new campaigns we will need to launch when the political tide begins to turn. We must be ready to develop new mechanisms for resource allocation and new models of service programs for children that would avoid the categorical and deficit-focused child intervention schemes that have not met our goals up to now. When neglect as a social problem is fully recognized in its broadest dimensions within a context of poverty by professionals, political leaders and the public, we will have made great strides toward removing a major obstacle to the preparation of such an agenda.

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